

Department of Health and Human Services
Office of Adult Mental Health Services

Summary of the Rights of Recipients of Mental Health Services

This is a summary of your rights as a recipient of community based services under the Rights of Recipients of Mental Health Services. You have a right to obtain a full copy of the rights from this agency or from the Department of Health and Human Services, Office of Adult Mental Health Services, 11 State House Station-Marquardt Bldg.-2nd Floor, Augusta, Maine 04333, Tel # (207) 287-4250, TTY #: 1-800-606-0215. If you are deaf or do not understand English, an interpreter will be made available to you so that you can understand your rights.

1. Basic Rights: You have the same civil, human, and legal rights which all citizens have. You have a right to be treated with courtesy and full respect for you individuality and dignity.
2. Confidentiality and Access to Records: You have the right to have your records kept confidential and only released with your full informed consent. You have the right to review your record at any reasonable time. You may add written comments to your record to clarify information you believe is inaccurate or incomplete. No one else can see your record unless you specifically authorize them to see it, except in instances described in the complete rights book.
3. Individualized Treatment or Service Plan: You have the right to an individualized plan, developed by you and your worker, based upon your needs and goals. The plan must be in writing and you have the right to a copy. The plan needs to specifically detail what everyone will do, the time frames in which the tasks and goals will be accomplished and how success will be determined. The plan must be based upon your actual needs and, if a needed service is not available, detail how your need will be met.
4. Informed Consent: No services or treatment can be provided to you against your will. If you have a guardian, he or she is authorized to make decisions without your consent. You have the right to be informed of the possible risks and anticipated benefits of all services and treatment, including medications, in a manner which you understand. If you have any questions, you may ask your worker or anyone else you choose before making decisions about treatment or services. If a guardian has been authorized to make decisions for you, the guardian has the right to be fully informed of all risks and benefits or proposed treatment or services.
5. Assistance in the Protection of Rights: You have the right to appoint a representative of your choice to help you understand your rights, protect your rights or help you work out a treatment or service plan. If you wish a representative, you must designate this person in writing. You can have access to the representative at any time you wish and you can change or cancel the designation at any time.
6. Freedom from Seclusion and Restraint. You cannot be secluded or restrained in the community setting.
7. Right to File a Grievance. You have the right to bring a grievance to challenge any possible violation of your rights or any questionable practices. You have the right to have your grievance answered in writing, with reasons for the decisions. You may appeal any decision to the Office of Adult Mental Health Services. You may not be punished in any way for filing a grievance. You cannot be retaliated against for filing a grievance. For help with filing a grievance, contact the Grievance Coordinator, 11 State House Station-Marquardt Bldg. 2nd Floor, Augusta, Maine 04333, Tel #: 287-4249 or The Disability Rights Center of Maine, PO Box 2007, Augusta Maine 04338-2007. Tel # 1-800-452-1948.

I have received a copy of the summary of the Rights of Recipients of Mental Health Services.

Client Signature _____

Date _____

Witness Signature _____

Date _____

3/18/2008